Standard Operating Procedures (SOPs) Signature Page

My Faculty/Laboratory Supervisor has reviewed the SOPs with me. I have read all the materials in the SOPs. I understand this material and how it applies to the laboratory in which I will be working with *(Insert hazardous chemicals.)*. I realize I must follow these SOPs closely to ensure my own safety, and that of my fellow laboratory mates and Faculty/Laboratory Supervisor. I have familiarized myself with the location of safety equipment contained in the laboratory, and I have asked for clarification of those points I did not understand.

Date:	
Student Name (Please Print):	
Signature of Student:	
Faculty/Laboratory Supervisor (Please Print):	
Signature of Faculty/Laboratory Supervisor:	